CLAIMS AS FILED - PART I COLUMN 1) (Column 2) TOTAL CLAIMS FOR MUNDER FRED MUNDER MULTIPLE DEPENDENT CLAIM SMALL ENTITY COLUMN 1) (Column 2) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) CLAIMS AS AMENDED - PART II (Column 2) (Column 3) MUNDER MUNDER MUNDER MUNDER MUNDER MUNDER FREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL MINUS REMARDING MUNDER MALL ENTITY MALL ENTI									Application or Docket Number					
CLAIMS AS FILED - PART Column 1)	PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003													
TOTAL CLAIMS FOR NUMBER FIED NUMBER EXTRA NUMBER EXTRA NOPPENDENT CLAIMS Ominus 20= 'O' NOPPENDENT CLAIM PRESENT If the difference in column 1 is less than zero, enter 'O' in column 2 TOTAL CHARGEABLE CLAIMS Ominus 20= 'O' X5 9= OR X519= X42= OR X64= AULTIPLE DEPENDENT CLAIM PRESENT CLAIMS AS AMENDED - PART II COlumn 1) CCOlumn 2) CCLAIMS AS AMENDED - PART II COlumn 1) CCOLUMN 2) COLUMN 3) REMARKING REMARKING AUTHER PREVIOUSLY PRESENT PREVIOUSLY PRESENT TOTAL ADDI- FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL ADDI- FRET THAN COLUMN 3 INCRESS RATE TIONAL FEE X84= 1140= OR X518= X42= OR X518= X42= OR X518= Independent - V Minus - 3 - WA2= Independent - B Minus - B Minus - B WA2= Independent - B WA2= Indepe	CLAIMS AS FILED - PART I													
TOTAL CHAMS FOR NUMBER FALE NUMBER REPARABINA REJAMBANINA REJAMBANINA REJAMBANINA NUMBER FALE NUMBER REJAMBANINA REJAMBANINA NUMBER REJAMBANINA REJAMBANIN	70741 01			(Column 1)			4							
NUMBER FILED NUMBER EXTRA OTAL CHARGEABLE CLAIMS Ornicus 20s ON XS 9s OR XS 18s NUMBER EXTRA NUMBER FILED NUMBER EXTRA OTAL CHARGEABLE CLAIMS Ornicus 20s ON XS 9s OR XS 18s NUMBER PRESENT OTAL XS 9s OR XS 18s X42s OR XS 4s H40s OR +280s OTAL TOTAL OTAL OTAL TOTAL OTAL TOTAL OTAL TOTAL OTAL TOTAL OTAL	TUTAL CLAIMS			16					E	FEE	1			
TOTAL CHARGEABLE CLAIMS	FOR			NUMBER FRED		NUMBER EXTRA		BASIC	FEE	375.00	100			
MULTIPLE DEPENDENT CLAIM PRESENT If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 2) CLAIMS AS AMENDED - PART II (Column 3) CLAIMS AS AMENDED - PART II (Column 3) CLAIMS REMARING R	TOTAL CHARGEABLE CLAIMS			6 minus 20=		. 0		XS	X\$ 9=		1			
### COLUMN 1 Is less than zero, enter "O" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) (Column 4) (Column 4) (Column 4) (Column 4) (Column 5) (Column 5) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) (Colum	INDEPENDENT CLAIMS			7 minus 3 = 1					X42-		1	YOA		
If the difference in column 1 is less than zero, enter '0' in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) REMARING HUMBER HUMBER AMENDED AMENDER HERVOLUSLY PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total // Minus == 20 - X\$9= OR X\$18= Independent // Minus == 20 - X\$9= OR X\$18= CLAIMS REMARING HUMBER PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total // Minus == 20 - X\$9= OR X\$18= CLAIMS REMARING HUMBER PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total // Minus == 20 - X\$9= OR X\$18= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= OR X\$9= Independent // Minus == 20 - X\$9= OR X\$9= Inde	MULTIPLE D	EPENDE	NT CLAIM P	RESENT			-			OR	. ₩			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) ()=		OR	+280=		
Column 1 Column 2 Column 3 SMALL ENTITY OR SMALL ENTIT									AL.	375	OR	TOTAL		
Column 1) Column 2) Column 2) Column 3) SMALL ENTITY OR SMALL	· Autorities and the second se											OTHER	THAN	
REMARKING AMERICANT PREVIOUSLY PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total							(Column 3)	SMALL ENTITY			OR			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 140s	ENDMENT A leto!		REMAINING AFTER		NUME PREVIO	BER		RAT	E	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 140s	Total						• -	X\$ 9	læ.		OR	X\$18-		
140 OR 1280a TOTAL OR ADDIT. FEE CLABMS REMAINING AFTER AMENDMENT RATE TIONAL FEE Independent B Minus See B ADDIT. FEE CLABMS See B ADDIT. FEE Independent OR MULTIPLE DEPENDENT CLAIM CCOlumn 1) (Column 2) (Column 3) RATE TIONAL FEE X\$ 90 OR X\$180 TOTAL OR ADDIT. FEE X\$ 90 OR X\$180 TOTAL OR ADDIT. FEE CAUMS REMAINING AFTER ADDIT. FEE INCOMPRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PREVIOU	3 11000			MINITED 880 >		•		X42-			OD.	X84=		
TOTAL ADDIT FEE OR TOTAL ADDIT FEE OR ADDIT	Tring I PRESENTATION OF MULTIPLE DEPENDENT CLAIM										On			
CLAIMS REMADNING AFTER AMENDMENT RICHIEST NUMBER PREVEOUSLY PAID FOR Independent B CAUMS REMADNING AFTER AMENDMENT RATE RATE RATE RATE RATE RATE RATE RAT	1	1						•		•	OR			
CLAIMS REMARKING AFTER AMENDMENT Total Independent B CLAIMS REMARKING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM CCOlumn 1) CCOlumn 2) CCOlumn 3) CCAIMS REMARKING REMARKING REMARKING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR AMENDMENT Total AMENDMENT PREVIOUSLY PAID FOR AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total Total Total AMENDMENT PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total TOTAL ADDIT. FEE X\$ 80 OR X\$185 TIONAL FEE X\$ 80 OR X\$185 TIONAL FEE THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT THOMPACHEMENT TOTAL ADDIT. FEE OR X\$ 80 OR X\$ 185 TOTAL ADDIT. FEE OR X\$ 185 TOTAL ADDIT. FEE OR X\$ 185 OR TOTAL ADDIT. FEE OR X\$ 185 OR TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL TOTAL ADDIT. FEE OR X\$ 280 OR TOTAL ADDIT. FEE OR TOTAL ADDIT. FE	0/22/05										OR			
REMARING AFTER PREVIOUSLY PAID FOR PRESENT EXTRA Total . / / Minus = 26 = X\$ 90 OR X\$18= Independent . S Minus see 3 . X42= OR X840 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 1) (Column 2) (Column 3) CLAUS REMARING AFTER AMENDMENT PREVIOUSLY PAID FOR NUMBER PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR STRA MINUS see 3 . X42= OR X\$18= (Column 2) (Column 3) CLAUS REMARING AFTER AMENDMENT PREVIOUSLY PAID FOR STRA PREVIOUSLY PAID FOR STRA PREVIOUSLY PAID FOR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18= Independent . 3 Minus see 3 . X42= OR X\$18=	0-1001	103	Column 1)				(Column 3)							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR +280=	Total Independ		AFTER		NUME PREVIO	ER		RATI	E	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 140a 170TAL	Total	-	14		-20	5	-	X3 9	.		OR	X\$18=		
140= CR +280= TOTAL ADDIT. FEE OR ADDIT. FEE CLAMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR FEE X\$ 9= OR Independent 3 Minus 6= 3 6	FIRST PF		TION OF MIL			CI AIM	0	X42				X840		
CCOLUMN 1) (Column 2) (Column 3) CCAMS REMARKING AFTER AMENDMENT Total Independent Total FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.	_							+140			OR	+280=		
(Column 1) (Column 2) (Column 3) CLAUMS REMAINING AFTER AMENDMENT Total Independent 3 Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write '0' in column 3.		60					•				OR L	TOTAL		
CLAIMS REMAINING AFTER AMENDMENT Total 19 Minus 20 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, tente '0' in column 3.	1/34	UL 10	Column 1)		(Cohim	n 21	(Cohima 3)	ADUIT, F	ce i	i	/	WOIT. FEEL		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write 'V' in column 3. When a first present the entry in column 2, write 'V' in column 3.	,		CLAIMS		HIGHE	61			-	400:	,			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write 'V' in column 3. When a first present the column 1 is less than the entry in column 2. write 'V' in column 3.	Total		AFTER		PREVIO	USLY		RATE		TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2, write 'V' in column 3. When a first present the entry in column 2, write 'V' in column 3.	Total		19	Minus	- 24	6		YS O.	1		}	Yeso.	TEE	
If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.	inaepena						•		4		OR			
If the entry in column 1 is less than the entry in column 2, write '0' in column 3.	FIRST PR	RESENTA	TION OF MU	LTIPLE DE	ENDENT	CLAIM		X42=	1		OR	X84		
	If the entry in column 1 is less than the entry in column 2, write for in column 3								1		OR	£280=		
If the Highest Number Previously Peld For IN THIS SPACE is less than 20, enter "20." To Highest Number Previously Peld For IN THIS SPACE is less than 3, enter "3." ADDIT. FEE	_ n and landing		Previously Pa	id For IN THI	R RPACE L	-	200				OR,	TOTAL		
The "Highest Number Previously Paid For" (Total or independent) is the highest number bund in the appropriate box in column 1.	The Highes	t Number F	reviously Pak	For (Total o	o orace is independen	ing is the	nghest number			opriate box	r Sicolu	m t,		

Parant and Trademark Ottos, U.S. DEPARTMENT OF COMMERCE

*U.S. Generalment Printing Office: 2003-400-464/70016

FORM PTO-675 (Res. 12/02)